

APR 13 2007

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FROM: Catherine M. Polizzi

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Comments:

Attorney Docket No.: 51471-20006.00
 Patent Application Serial No.: 10/682,332
 Filed: October 8, 2003
 Inventor(s): David L. SHELTON et al.
 Art Unit: 1647
 Examiner: J. Lockard
 Title: METHODS FOR TREATING PAIN BY ADMINISTERING AN ANTI-NERVE GROWTH
 FACTOR ANTIBODY AND AN OPIOID ANALGESIC (As Amended)

Papers Attached:

1. Transmittal (1 page)
2. Request for Withdrawal as Attorney or Agent and Change of Correspondence Address (1 page)

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/682,332	
	Filing Date	October 8, 2003	
	First Named Inventor	David L. SHELTON	
	Art Unit	1647	
	Examiner Name	J. Lockard	
Total Number of Pages in This Submission	2	Attorney Docket Number	514712000600

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Withdrawal as Attorney or Agent and Change of Correspondence Address (1 page) Facsimile
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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/682,332
	Filing Date	October 8, 2003
	First Named Inventor	David L. SHELTON
	Art Unit	1647
	Examiner Name	J. Lockard
	Attorney Docket Number	514712000600

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